

July 27, 2018

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Commissioner Myers,

Thank you for the opportunity to provide recommendations for the use of State Opioid Response (SOR) grant funds. This is a critical opportunity for New Hampshire to invest significant resources so as to have maximum impact towards addressing our state's opioid crisis. As a nonpartisan, education policy nonprofit, Reaching Higher New Hampshire (Reaching Higher) works alongside of educators, parents, students, and community-members on a daily basis, and we see the effects of the opioid crisis in our schools, and in the lives of our students. Our recommendations focus on using SOR funds to expand existing, school-centric models for prevention, treatment, and recovery, catalyze new school-centric, evidence-based prevention, treatment, and recovery models, and support community school models for co-locating and integrating health and educational resources in the cities and towns most impacted by the opioid crisis.

First, we recommend SOR funds go to New Hampshire school districts actively participating in one or more of several initiatives overseen by the New Hampshire Department of Education (DOE), Office of Student Wellness (OSW); in particular, Project GROW (Generating Resilience, Outcomes, and Wellness), FAST (Families and Systems Together) Forward 2020, and Safe Schools / Healthy Students.

Funding directed to these projects will support interventions with demonstrated effectiveness, improving outcomes for the students and families not just within the participating districts, but for the whole state as these communities serve to demonstrate how districts can implement evidence-based practices. Laconia School District, for example, has served as a vocal leader within New Hampshire and nationally, for school-based efforts to address the impacts of opioids. Since implementing a Multi-Tiered Systems of Support for Behavioral Health and Wellness (MTSS-B), including mental health supports and preventative education, Laconia has experienced significant gains in the reduction of at-risk behaviors and indicators, with office discipline referrals dropping by over 50% since 2013-2014 and the percentage of students who report easy access to prescription drugs without a prescription dropping from 34.3% in 2015 to 14.9% in 2017. New Hampshire should use SOR funds to support these successful initiatives and to expand existing communities of practice within New Hampshire's health and education sectors around best practices for school-centric treatment, recovery, and prevention efforts.

Second, we recommend New Hampshire use SOR funds to expand the number of school districts implementing evidence-based, school-centric models for opioid treatment, recovery, and prevention.

The Department of Health and Human Services (DHHS) should work with DOE's OSW to implement a sub-grant competition where districts apply for seed funding to implement new, evidence-based practices to address the opioid crisis. There are a range of interventions with demonstrated effectiveness in preventing at-risk behaviors related to the opioid crisis, such as <u>nurse-home visiting</u>, <u>PROSPER</u> Community Prevention Delivery Systems, the <u>MTSS-B framework</u> active in several New Hampshire communities, and programs including <u>Botvin LifeSkills</u> (for grades 3-5), <u>Recovery High Schools</u>, and <u>Project SUCCESS</u> (for grades 6-12). By using SOR funds to con-



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duct a competitive application process, DHHS and OSW can galvanize local communities to assess their specific needs and assets, identify the evidence-based approach (selected from a menu of options so that there can be cohorts of subgrantees working on similar initiatives) best suited to their situation, and then implement and evaluate the work. Even those communities not selected for funding will benefit from an application process which requires them to analyze how best to leverage school and other local resources to address the opioid crisis. A competitive process will also stimulate local ownership and innovation, both of which are critical to our state's efforts to get ahead of the opioid crisis.

Finally, we recommend allocating SOR funds to support community school models for integrating health services within municipalities' educational infrastructure

In Manchester, for example, the health department leads community schools initiatives at four elementary schools serving students with the greatest exposure to adverse childhood experiences (ACEs). The community school model includes dedicated care coordinators and health services for the neighborhoods, based out of the elementary schools. By transforming the elementary schools into hubs for coordinated, multi-generational care and supports, the city is eliminating many of the barriers residents face to accessing treatment, recovery, and even more basic care. Community schools are a key component of the Greater Manchester Health Improvement Plan but are also applicable to other cities and school districts where residents face substantial impediments to accessing essential care related to the opioid crisis. New Hampshire should use SOR funds to expand existing community schools initiatives or incubate new community schools as part of municipalities' larger strategy to address the opioid crisis.

In closing, we appreciate the opportunity to provide input and we are eager to work with the Department, schools, and other stakeholders in tackling this urgent issue.

Sincerely,

Dan Vallone, Policy Director

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On behalf of Reaching Higher New Hampshire